Notice: Fill out COMPLETELY and return to Conservation Division at the address below within 60 days from plugging date.

Kansas Corporation Commission Oil & Gas Conservation Division

Form CP-4 March 2009 Type or Print on this Form Form must be Signed All blanks must be Filled

WELL PLUGGING RECORD K.A.R. 82-3-117

OPERATOR: License #: 34278				API No. 15 - 053-21239-00-00											
Name:Ace Oil Company, Inc				Spot Description:											
Address 1: P.O. Box 606		NW NW NW SW Sec. 29 Twp. 15 S. R. 10 East West													
Address 2:															
								Producing Formation(s): List All (If ne	-	or tes No				(Date)	
								Depth to Top: _		T.D :	· ·	2/20		Agent's Name)	
								Depth to Top: Bottom: T.D				Plugging Commenced: 3/28/2010 Plugging Completed: 3/28/2010			
								Depth to Top: _		T.D.	Plugging C	ompleted: 3/20	/2010		
											<u></u>			· · · · · · · · · · · · · · · · · · ·	
								Show depth and thickness of all wate	r, oil and gas formations.						
Oil, Gas or Water Records			Casing Record (Surface, Conductor & Production)												
Formation Cont	ent Casing	Size		Setting Depth	Pulled Out										
	Surface	e 8 5/	/8"	542'	None										
				· · · · · · · · · · · · · · · · · · ·											
						l									
Plugged with 205 sacks plug - 35 sacks @ 1300@ 60'. Rat hole - 15 sa	D', 3rd. plug - 35 sa acks, mouse hole -	cks @ 950', 4th. 10 sacks.	plug - 50	O sacks @ 65	50', 5th. plug - 25 KANSAS COF AF	•									
Address 1: P.O. Box 606			s 2:												
City:Russell,			_ State: <u>K</u>	ansas	zip: <u>67665</u>	+									
Phone: (785) 483-6446			_			A									
Name of Party Responsible for Plugg	ing Fees: <u>Ace Oil Con</u>	npany, Inc.													
State of Kansas	County, Russe	11	, ss.												
Shawn D. Evans	Employee of Operator or Operator on above-described well,														
	(Print Name)		<u>-</u> p	oyee or operator or	P Operator on above-u	Johnson Well,									
eing first duly sworn on oath, says: T he same are true and correct, so hel		cts statements, and matte	ers herein cont	ained, and the log o	f the above-described well i	s as filed, and									
Signature: Shaum D	. Evens														